

CLAIM FOR \$12,000 LUMP SUM DEATH BENEFIT (FOR SPOUSES ONLY) 1977 POLICE OFFICERS' & FIREFIGHTERS' **PENSION & DISABILITY FUND**

State Form 53684 (8-08) Approved by State Board of Accounts, 2008

1977 POLICE OFFICERS' & FIREFIGHTERS' **PENSION & DISABILITY FUND**

143 West Market Street Indianapolis, Indiana 46204-2899 Toll Free: (888) 526-1687 TDD for hearing impaired: (317) 466-1000

* This agency is requesting disclosure of Social Security Numbers in accordance with IRS code; disclosure is mandatory and this form will not be processed without it.

- INSTRUCTIONS: 1. Please type or print in black ink.
 - 2. This claim must be completed by the surviving spouse.
 - 3. Please submit a copy of both the deceased member's and the surviving spouse's birth certificate. Documents showing the date of birth may be a photocopy of a birth certificate, a baptismal or confirmation certificate, or a court decree. Attach an English translation to any foreign document.
 - 4. Please submit a copy of the member's death certificate.
 - 5. Please submit a copy of the marriage certificate.
 - 6. Please have this application notarized.
 - 7. All of the above items must be provided; this application will not be processed without them.
 - 8. If this form is not completed properly, it will be returned to you and the processing of your claim will be delayed.

Date application completed by applicant (month, day, year)					
	DECEASED MEMI	BER INFORMATION			
Name of deceased member (first, middle, maiden, last) - Please provide full name; do not use initials.		t use initials.	Social Security Number *		
Address at time of death (number and street, city, state, an	d ZIP code)				
Department or unit where deceased member was employe	d				
Date of birth (month, day, year)		Date of death (month, day, year)			
	SPOUSAL II	NFORMATION			
Full name (first, middle, last)			Social Security Number *		
Address (number and street, city, state, and ZIP code)					
Telephone number	Date of birth (month, day, year)		Date of marriage to deceased member (month, day, year)		
Please read the Supplemental Notice and the No appear on pages 2 through 5.	tice Regarding Plan Paymo	ents ("Tax Notice"), which w	ere prepared by the Internal Revenue service and		
I have received and I have read and I understand	the supplemental Notice a	and the special Tax Notice o	on pages 2 through 5.		
Signature of surviving spouse			Date (month, day, year)		

SUPPLEMENTAL NOTICE ELIGIBLE ROLLOVER DISTRIBUTIONS TO SPOUSES OF MEMBERS OF THE 1977 FUND

Part of State Form 53684 (8-08)

Following this Supplemental Notice is a Special Tax Notice Regarding Plan Payments ("Tax Notice") prepared by the Internal Revenue Service (IRS), which we are required to give you prior to making certain distributions from the 1977 Police Officers' and Firefighters' Pension and Disability Fund ("Fund"). It is very important that you understand your rights as described in the Tax Notice; therefore, the administrators of the Fund recommend that you review the Tax Notice with someone who can provide advice about the information it contains and how that information relates to the payment that you will receive from the fund.

In addition to the information contained in the Tax Notice, The Public Employees' Retirement Fund (PERF) has prepared this Supplemental Notice to review how the IRS requirements apply to the payment of the \$12,000 lump sum death benefit.

- 1. You have the choice of receiving all or part of the \$12,000 eligible rollover distribution or of having all or part of the distribution directly rolled over into an Individual Retirement Annuity (IRA) that is willing to receive the direct rollover on your behalf. If you choose to receive part of the eligible rollover distribution and to have part rolled over into an IRA, the part that is rolled over must be at least \$500.
- 2. PERF must automatically withhold 20% from any part of the \$12,000 eligible rollover distribution that is not directly rolled over. This is an IRS requirement.
- 3. If you elect to receive all or part of the \$12,000 eligible rollover distribution, you may then rollover all or part of the benefit yourself to an IRA within sixty (60) days after you receive the payment. Please review the Tax Notice for the procedures which you may follow to execute a regular rollover.
- 4. Prior to receiving payment, you must complete the attached election form indicating the payment method(s) you desire. If you desire to <u>directly</u> roll over all or part of the \$12,000 eligible rollover distribution to an IRA, you must complete the information concerning the IRA.
- 5. If you elect a direct rollover, PERF will send you a check made out to the trustee of the IRA that you designate on the attached election form. You will then be responsible for delivering the check to the trustee.

SPECIAL TAX NOTICE REGARDING PLAN PAYMENTS

Part of State Form 53684 (8-08)

This notice was prepared by the Internal Revenue Service (IRS). It was not prepared with specific provisions of the 1977 Police Officers' and Firefighters' Pension and Disability Fund ("Fund") in mind. We have provided you with other information specific to the Funds. However, this notice should be helpful in understanding the possible tax effects of your election.

SUMMARY

A payment from the Plan that is eligible for rollover can be taken in two (2) ways. You can have all or any portion of your payment either 1) paid in a direct rollover or 2) paid to you. A rollover is a payment of your plan benefits to your individual retirement arrangement (IRA) or to another employer plan. This choice will affect the tax you owe.

If you choose a direct rollover:

- Your payment will not be taxed in the current year and no income tax will be withheld.
- Your payment will be made directly to your IRA or, if you choose, to another employer plan that accepts your rollover.
- Your payment will be taxed later when you take it out of the IRA or employer plan.

If you choose to have your plan benefits paid to you:

- You will receive only 80% of the payment because the plan administrator is required to withhold 20% of the payment and send it to the IRS as income tax withholding to be credited against your taxes.
- Your payment will be taxed in the current year unless you roll it over. You may be able to use special tax rules that could reduce the tax you owe. However, if you receive the payment before age 59½, you may have to pay an additional 10% tax.
- You can roll over the payment by paying it to your IRA or to another employer plan that accepts your rollover within sixty (60) days of receiving the payment. The amount rolled over will not be taxed until you take it out of the IRA or employer plan.
- If you want to roll over 100% of the payment to an IRA or employer plan, you must find other money to replace the 20% that was withheld. If you roll over only the 80% that you receive, you will be taxed on the 20% that was withheld and that is not rolled over.

SPECIAL TAX NOTICE REGARDING PLAN PAYMENTS (continued)

Part of State Form 53684 (8-08)

MORE INFORMATION

- Direct Rollover
- II. Payment Paid to You

I. DIRECT ROLLOVER

You can choose a direct rollover of all or any portion of your payment that is an "eligible rollover distribution" as described above. In a direct rollover, the eligible rollover distribution is paid directly from the plan to an IRA or another employer plan that accepts rollovers. if you choose a direct rollover, you are not taxed on a payment until you later take it out of the IRA or employer plan.

Direct rollover to an IRA. You can open an IRA to receive the direct rollover. (The term "IRA" as used in this notice includes individual retirement accounts and individual retirement annuities.) if you choose to have your payment made directly to an IRA, contact an IRA sponsor (usually a financial institution) to find out how to have your payment made in a direct rollover to an IRA at that institution. If you are unsure of how to invest your money, you can temporarily establish an IRA to receive the payment. However, in choosing an IRA, you may wish to consider whether the IRA you choose will allow you to move all or part of your payment to another IRA at a later date, without penalties or other limitations. See IRS Publication 590, Individual Retirement Arrangements, or more information on IRAs (including limits on how often you can roll over between IRAs).

Direct rollover to a plan. If you are employed by a new employer that has a plan and you want a direct rollover to that plan, ask the administrator of that plan whether it will accept your rollover. An employer plan is not legally required to accept a rollover. If your new employer's plan does not accept a rollover, you can choose a direct rollover to an IRA.

II. PAYMENT PAID TO YOU

If you have the payment made to you, it is subject to 20% income tax withholding. The payment is taxed in the year you receive it unless, within sixty (60) days, you roll it over to an IRA or another plan that accepts rollovers. If you do not roll it over, special tax rules may apply.

INCOME TAX WITHHOLDING

Mandatory Withholding. If any portion of the payment to you is an eligible rollover distribution, the Plan is required by law to withhold 20% of that amount. This amount is sent to the IRS as income tax withholding. For example, if your eligible rollover distribution is \$10,000, only \$8,000 will be paid to you because the Plan must withhold \$2,000 as income tax. However, when you prepare your income tax return for the year, you will report the full \$10,000 as a payment from the Plan. You will report the \$2,000 as tax withheld and it will be credited against any income tax you owe for the year.

Voluntary withholding. If any portion of your payment is not an eligible rollover distribution but is taxable, the mandatory withholding rules described above do not apply. In this case, you may elect not to have withholding apply to that portion. To elect out of withholding, ask the Plan administrator for the election form and related information.

Sixty-day rollover option. If you have an eligible rollover distribution paid to you, you can still decide to roll over all or part of it to an IRA or another employer plan that accepts rollovers. If you decide to roll over, <u>you must make the rollover within sixty (60) days after you receive payment</u>. The portion of your payment that is rolled over will not be taxed until you take it out of the IRA or employer plan.

You can roll over up to 100% of the eligible rollover distribution, including an amount equal to the 20% that was withheld. If you choose to roll over 100%, you must find other money within the sixty (60) day period to contribute to the IRA or employer plan to replace the 20% that was withheld. On the other hand, if you roll over only the 80% that you received, you will be taxed on the 20% that was withheld.

Example: Your eligible rollover distribution is \$10,000 and you choose to have it paid to you. You will receive \$8,000 and \$2,000 will be sent to the IRS as income tax withholding. Within sixty (60) days after receiving the \$8,000, you may roll over the entire \$10,000 to an IRA or employer plan. To do this, you roll over the \$8,000 you received from the Plan and you will have to find \$2,000 from other sources (your savings, a loan, etc.). In this case, the entire \$10,000 is not taxed until you take it out of the IRA or employer plan. If you roll over the entire \$10,000, when you file your income tax return, you may get a refund of the \$2,000 withheld.

If, on the other hand, you roll over only \$8,000, the \$2,000 you did not roll over is taxed in the year it was withheld. When you file your income tax return, you may get a refund of part of the \$2,000 withheld. (However, any refund is likely to be larger if you roll over the entire \$10,000.)

HOW TO OBTAIN ADDITIONAL INFORMATION

This notice summarizes only the Federal (not state or local) tax rules that might apply to your payment. The rules described above are complex and contain many conditions and exceptions that are not included in this notice. Therefore, you may want to consult with a professional tax advisor before you take a payment of your benefits from the Plan. Also, you can find more specific information on the tax treatment of payments from qualified retirement plans in IRS Publication 575, Pension and Annuity Income, and IRS Publication 590, Individual Retirement Arrangements. These publications are available from your local IRS office or by calling (800) TAX-FORMS.

SPOUSAL ELECTION Part of State Form 53684 (8-08)

- INSTRUCTIONS: 1. Initial only one of the choices listed below. The choice you initial must be the same as the choice you elect.
 2. This choice cannot be changed after this form is received by the 1977 fund.

	ELECTION					
I elect to have the total amoun	t of my \$12,000 lump sum death benefit (initia	l only one):				
Choice A	Choice A Paid directly to me (less mandatory withholding for Federal income tax).					
Choice B	e B All in the form of a direct rollover to an IRA or a qualified retirement plan which has provisions allowing it to accept the rollover on my behalf.					
Choice C Select only if you want a partial rollover amount of at least \$500. I elect to have a part of my \$12,000 lump sum death benefit paid in the form of a direct rollover to an IRA or a qualified retirement plan which has provisions allowing it to accept the rollover on my behalf. The part of the taxable portion of the distribution which is not directly rolled over will be paid directly to me (less the mandatory withholding for Federal income tax).						
If you elect Choice C, amount of partia	al rollover (must be at least \$500):					
I hereby elect	as my choice for payment of my \$12,000 lt	ump sum death benefit.				
Signature of applicant			Date (month, day, year)			
STATE INCOME TAX						
Do you want State income tax	of 3.4% withheld from your benefit?	☐ Yes ☐ No				
Signature of applicant			Date (month, day, year)			
	COMPLETE THIS SECTION ONLY	Y IF YOU ELECT CHOICE B	OR C			
Name of trustee		IR	A account number, if applicable			
Name of qualified retirement plan or II	RA (This must be the complete name of the qualified	retirement plan or IRA as reported	I by the trustee to the IRS.)			
I represent that the designated plan is a qualified retirement plan or an Individual Retirement Account (IRA) which has provisions allowing it to accept direct rollovers on my behalf. The 1977 fund should make the direct rollover check for the amount shown above payable to the above-named trustee as trustee of the above-named qualified retirement plan / IRA.						
Signature of applicant			Date (month, day, year)			
I, having been sworn, do on my oath depose and say that: I am the person who completed the foregoing claim form; I have carefully read the form and understand the same; all of the information I have provided and the questions I have answered are full, complete and true, and no material fact has been concealed or omitted therefrom; and that said information and answers are provided for presentation to the board of trustees of the Public Employees' Retirement Fund of Indiana in making claim for a \$12,000 lump sum death benefit that may be payable to me under IC 36-8-8-1 et seq.						
Signature of applicant			Date (month, day, year)			
CERTIFICATION OF NOTARY PUBLIC						
STATE OF SS: COUNTY OF						
Subscribed and sworn to before	re me, a notary public, in and for the state and	county above named, by the	said applicant,			
, on this day of, 20 Name of applicant						
Signature of notary public		Printed name of notary public				
County of residence		Date commission expires (month	, day, year)			

CERTIFICATION OF EI	MPLOYER			
Complete if member was active / working at the time of death.				
Name of state agency, institution, or municipality	Account number of employer			
Address (number and street, city, state, and ZIP code)				
Name of authorized agent	Telephone number			
I hereby certify that the last day in pay status for	ember Social Security Number *			
Signature of authorized agent	Date (month, day, year)			
FOR 1977 FUND OFFICE Date of claim (month, day, year)	E USE ONLY			